

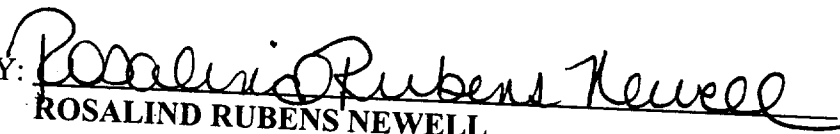
Entered - 10/17/01 - sb
CL01L0640 - DIANNE C. MITCHELL

01-R-1837

CLAIM OF: **MICHAEL THOMPSON**
1628 Roman Point Drive
Norcross, Georgia 30093

For damages alleged to have been sustained as a result of vehicular damage during a police shoot out on August 25, 2001 at 1055 Peachtree Street.

THIS ADVERSED REPORT IS APPROVED

BY: 
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 01L0640

Date: October 31, 2001

Claimant /Victim MICHAEL THOMPSON

BY: (Atty)(Ins. Co.)

Address: 1628 Roman Point Drive, Norcross, Georgia 30093

Subrogation: Claim for Property damage \$ 3,594.74 Bodily Injury \$

Date of Notice: 09/24/01 Method: Written, proper X Improper

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 08/25/01 Place: 1055 Peachtree Street

Department Police

Division:

Employee involved Disciplinary Action:

NATURE OF CLAIM: The claimant alleges that his vehicle was damaged when a police officer shot and killed an armed perpetrator who was standing in front of his vehicle. The City is immune from liability as set forth in O.C.G.A. §36-33-1 and §36-33-3.

INVESTIGATION:

Statements: City employee Claimant Others Written Oral Pictures Diagrams Reports: Police X Dept Report Other Traffic citations issued: City Driver Claimant Driver Citation disposition: City Driver Claimant Driver

BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial Improper Notice More than Six Months Other X Damages reasonable City not involved Offer rejected Compromise settlement Repair/replacement by Ins. Co. Repair/replacement by City Forces Claimant Negligent City Negligent Joint Claim Abandoned

Respectfully submitted,

Dianne C. Mitchell
INVESTIGATOR - DIANNE C. MITCHELL

RECOMMENDATION:

Pay \$ Adverse X Account charged: 1A01 2J01 2H01 Claims Manager: Committee Action: Concur/date 10-31-01 Council Action

COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK
City Hall
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335

RECEIVED

SEP 24 2001

MUNICIPAL CLERK

RE: CLAIM FOR DAMAGES

Today's Date: 9/8/01

Dear Municipal Clerk:

ENTERED - 10-17-01 - SB
01L0640 - DIANNE MITCHELL

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 3,594.74 proper and/or \$ _____ bodily injury for which I contend the City is liable.

1. Date of incident: 8/25/01 (month/day/year) 2. Time of Incident: 0311 3. Police called: X Yes No

4. Location of incident (including street address): 1055 Peachtree Street in Parking Lot

5. Name of your insurance company: Allstate Policy No. 631242312

6. State what and how incident occurred: A Police shooting when a man involved in a fight over a girl at club Kaya refused to surrender his gun. Officer shot + killed him in front of my 2001 Toyota RAV4.

7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!

8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: Toyota RAV4 2001 9194MNL Michael Thompson
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: Police Involved Shooting Officer Alton Porter APP# 2051
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: _____
(Name) (Address) (Telephone Number)

10. The acknowledgment of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Michael Thompson
Signature of Claimant

Michael Thompson
(Print Claimant's Name)

1628 Roman Point Drive
(Address)

Norcross, GA 30093
(City, State and Zip Code)

404-355-3415 770-564-3914
(Work Number) (Home Number)